Indian Health Performance Evaluation System ORYX "Fact" Sheet

The Indian Health Performance Evaluation System (IHPES) currently supports thirty hospitals for the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) ORYX requirements. The "fact" sheet is provided to assist both the JCAHO and participating IHPES sites to: 1) better understand the uniqueness of the Indian Health Service (IHS) data collection process, 2) issues that may affect the data received by the JCAHO for ORYX requirements and 3) understand enhancements already underway to improve the data collection/reporting process and satisfy the JCAHO's "core measure" standards.

I.   The IHPES is a "closed" system unique to Indian Health

- ➢ Resource Patient Management Software (RPMS) Patient Care Component (PCC) software used to support ORYX data collection is operational in three hundred (300+) sites throughout the United States.
- ➢ Data exports initiated monthly at the Health Care Organization (HCO) level.
- ➢ Data exports transmitted from HCO level → regional office (12 regional offices) for consolidation/bundling → IHPES in Albuquerque, New Mexico for processing/reporting.

II.   Issues That May Affect ORYX Data Collection Activities

- ➢ During 1999, Y2K software issues were top priority within the IHS. Sites could not export data to the IHPES until the HCO was compliant with the certified Y2K software distributed by the national software support program.
- ➢ Limited technical expertise is available at many sites to deal with hardware/ software issues.
- ➢ IHPES programming routines included logic to report health care received within a "service delivery" area. The logic was consistent with other IHS user population computer applications.
- ➢ Late data transmissions to the IHPES. The IHPES cannot provide a "make up" file to JCAHO to reflect late data received.

III. Improvements In Progress

- ➢ IHPES is revising all Diabetic indicators/programs to adopt IHS national standards for all diabetes reporting. The benefit will be a larger diabetic patient denominator count and better outcome reporting.
- ➢ IHPES is eliminating special routines to exclude requirement of patients living in a specified "service delivery area". This change will provide a

better picture of true level of health services being provided at the local HCO level.

➢ IHPES is moving to imbed the JCAHO "core measure" standards.
➢ ORYX data collection record is being expanded to include additional indicator measurement fields such as additional immunizations.
➢ An on going data quality program is being developed to assist IHPES ORYX sites address problems related to missing/incomplete data, "orphan" records and improved data collection processes.